

<b>NOTICE OF REVISION (NOR)</b>				1. DATE (YYMMDD)		Form Approved OMB No. 0704-0188	
<b>THIS REVISION DESCRIBED BELOW HAS BEEN AUTHORIZED FOR THE DOCUMENT LISTED.</b>							
Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Department of Defense, Washington Headquarters Services Directorate for information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302 and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188) Washington, DC 20503. PLEASE <b>DO NOT</b> RETURN YOUR COMPLETED FORM TO EITHER OF THESE ADDRESSES. RETURN COMPLETED FORM TO THE GOVERNMENT ISSUING CONTRACTING OFFICER FOR THE CONTRACT / PROCURING ACTIVITY NUMBER LISTED IN ITEM 2 OF THIS FORM.				2. PROCURING ACTIVITY NUMBER			
				3. DODAAC			
4. ORIGINATOR		b. ADDRESS (Street, City, State, Zip Code)		5. CAGE CODE		6. NOR NO.	
a. TYPED NAME (First, Middle Initial, Last)				7. CAGE CODE		8. DOCUMENT NO.	
9. TITLE OF DOCUMENT		10. REVISION LETTER		11. ECP NO.			
		a. CURRENT -					
12. CONFIGURATION ITEM (OR SYSTEM) TO WHICH ECP APPLIES						Sheet of	
13. DESCRIPTION OF REVISION							
14. THIS SECTION FOR GOVERNMENT USE ONLY							
a. (X one)		(1.) Existing document supplemented by this NOR may be used in manufacture.					
		(2.) Revised document must be received before manufacture may incorporate this change.					
		(3.) Custodian of master document shall make above revision and furnish revised document.					
b. ACTIVITY AUTHORIZED TO APPROVE CHANGE FOR GOVERNMENT				c. TYPED NAME (First, Middle Initial, Last)			
d. TITLE		e. SIGNATURE			f. DATE SIGNED		
15a. ACTIVITY ACCOMPLISHING REVISION		b. REVISION COMPLETED (Signature)			c. DATE SIGNED		